Post Office Box 84075 *Columbus, GA. 31993 Phone (800) 433-3036 * Fax (866) 849-2970 groupclaimfiling@affac.com



WELLNESS AND HEALTH SCREENING CLAIM FORM

Failure to complete all sections may result in delayed processing of this claim. Review your policy for specific benefits covered under your plan.

AUTHORIZATION

Any person who knowingly and with intent to defraud any insurance company, files a statement of claim containing any materially false, incomplete or misleading information, is guilty of a crime.								
I have checked the answers given by myself and they are correct. I AUTHORIZE any physician, medical practitioner, hospital, clinic other medical or medically related facility, insurance company, consumer report agency, or employer having information available as to diagnosis, treatment and prognosis with respect to any physical or mental condition and/or treatment and any non-medical information for me, to give to Continental American Insurance Company or its legal representative, any and all such information. This information is to include, but is not limited to information pertaining to diagnosis, care or treatment for psychiatric disorder, drug or allohol abuse, treatment or prescriptions, testing and/or treatment of HIV (AIDS virus) and/or other sexually transmitted diseases, including case history and medical antecedents. I UNDERSTAND the information obtained by use of the Authorization will be used by Continental American Insurance Company to determine eligibility for benefits under an existing certificate. Any information obtained will not be released by Continental America Insurance Company to any person or organization EXCEPT to re-insuring companies, or other person or organization performing business or legal services in connection with any claim, or as may otherwise lawfully required or as I may further authorize. I KNOW that I may request to receive a copy of this Authorization. I AGREE that this authorization shall be valid for the duration of my claim.								
Policyholder's Signature:		Date:	Claimant's Sign	ature:			De	ste:
		POLICYHOLDER/P	ATIENT INFOR	MATIO	N			
EMPLOYER'S NAME		•	POLICYHOLDER'S EM					
MAJOR MEDICAL INSURANCE PROVIDER			MAJOR MEDICAL IN:	SURANŒI	*			
POLICYHOLDER'S NAME	POLICY NO		SSN/ EM PLOYEE ID		DATE OF BIRTH		GENDER	
POLICYHOLDER'S ADDRESS		СПУ	STATE		ZIP CODE	POLICYHOLDE	R'S PHON	E NUMBER
CHECK BOX IF THIS IS A PERMANENT ADDRES	SS CHANGE							
PATIENT'S NAME		RELATIONSHIP TO THE POLIC	YHOLDER	PATIENT	S DATE OF BIRTH	1		PATIENT'S GENDER
*By providing your e-mail address above, yo by law (which may include, but not limited to								
	,	HEALTH SCREEN						
DATE HEALTH SCREENING TEST W	VAS PERFOR		WINE CHANGE	111014				
WHICH HEALTH SCREENING TEST DID YOU I	HAVE PERFORM	ED:						
TESTS COVERED UNDER ACCIDENT PLA	AN ONLY	TESTS COVERED UNDER	HOSPITAL INDEMNI	TY ONLY	TESTS COVER	RED UNDER CR	ITICAL IL	LNESS PLAN ONLY
Annual Physical Exam Ning		Annual Physical Exam						
Eye Examination Nash		HSN Strains (Herpes S	implex Virus)		Chest Xray	,		
Immunization (1)		Immunization			Colonosco	PY		
☐ Vision Sqreeking ☐ Non-diagnostic Vasc		Non-diagnostic Vascul	ar Screening Urinalys	is	Hemocult	Stool Analysis		
Not availabeing					_	r Screening		
40,						t (Bicycle or Tre	admill)	
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TESTS COVERED UNDER ALL PLANS								
Biometric Testing		CA 15-3 (Blood Test fo			Mammogr			
Blood Screening		CEA (Blood Test for Colon Cancer)			PAP Smear PSA (Blood Test for Prostate Cancer)			
Blood TestforTriglycerides		Fasting Blood Glucose			= '			•
Bone Marrow Testing		Flexible Sigmoidoscopy		Serum Cholesterol Test (HDL and LDL) Serum Protein Electrophoresis (Myeloma)				
CA 125 (Blood Test for Ovarian Cance				_		nesis (M	yeloma)	
HPV (Human Paillomavirus)								
PHYSICIAN INFORMATION								
NAME			TELEPHONE NUMBE	R				
ADDRESS			СПУ		STATE		ZIP COD	E



... Health Advocate is there for you

How can Health Advocate help keep your organization running in times of crisis?

Your organization has benefits and services for employees in times of crisis, but what happens when it experiences a disruptive event? Aflac has the solution: Health Advocate's Disruptive Event Management Services. More than 1,500 organizations like yours turn to Health Advocate each year to help navigate situations that can affect an employee's ability to work. These situations include:

- · Large reductions in staff.
- The unexpected death of an employee, either on the job or off.
- On-the-job accidents witnessed by employees.
- · Robberies or other violent incidents.
- Natural weather disasters such as floods, earthquakes, tornadoes and hurricanes.

Health Advocate, an Aflac partner, is committed to providing objective, timely and thorough responses that help with the human side of recovery. The company supports your organization's leaders and employees, creating a culture of safety that helps maintain productivity while encouraging workers to return to work and stay at work. In addition to providing site-management and crisis-leadership consultations, Health Advocate offers training that helps leaders develop the skills they'll need to manage a disruptive event.

Aflac isn't just about sales. We're about providing services and solutions that keep your organization running smoothly. For more information or to enroll in Health Advocate's Disruptive Event Management Services, **contact your Aflac agent.**



Aflac hasentered into a marketing alliance with Health Advocate whereby Health Advocate may provided is ruptive event services to accounts that choose to have this service. Other than this marketing alliance, Aflac and Health Advocate are not afflicated in any way. Aflac makes no representations or warranties regarding Health Advocate's products or services, and is not responsible for any products or services provided by Health Advocate in the products or services, please contact Health Advocate by calling 855-423-8585 or emailing answers@HealthAdvocate.com. The disruptive event services provided by Health Advocate are not available to Aflac accounts located in ID, MD, MN,NY, or PR. Disruptive event services are not available to residents of ID or MN. Additional state restrictions may apply and services may vary by state. Aflac | WWHQ 1932 Wynnton Road Columbus, GA31999.

Z190378R EXP521

AFLAC - STEPS PROGRAM FOR WASHINGTON SCHOOL DISTRICTS

For information or to enroll text: steps to 36260

Call our benefit counselors: 1 (833) STEPSWA (1.833.783.7792)

Aflac Accident Plan

The Aflac Accident plan provides cash benefits *directly to you* to help with out-of-pocket expenses - medical and nonmedical - associated with treatment in the event of a covered accident. A sudden accident might stop you in your tracks, but your bills — mortgages, utilities, groceries and out-of-pocket costs will keep on coming. Accident insurance can help cover the costs associated with the treatment of a covered accidental injury. More importantly, the plan helps you focus on getting better, not worrying about how you will pay your bill.

Plan Benefit Summary				
Doctor visits due to injury	\$75 - \$200			
Emergency dental work	\$30 - \$120			
Hospital Admission	\$900			
Additional Daily Hospital and Intensive care unit confinement	\$225 - \$525			
Follow up treatments	\$25 - \$35			
Travel/Lodging when injured 100 miles from home or treatments	\$150 - \$250			

Monthly Premiums				
Employee	\$8.22			
Employee + Spouse	\$13.99			
Employee + Child(ren)	\$19.56			
Family	\$25.33			



Just because an accident can change your health, doesn't mean it should change your lifestyle too.

Accidents can happen in an instant affecting you or a loved one. Aflac is designed to help families plan for the health care bumps ahead and take some of the uncertainty and financial insecurity out of getting better.

Protection for the unexpected, that's the benefit of the Aflac Group Accident Plan.

After an accident, you may have expenses you've never thought about. Can your finances handle them? It's reassuring to know that an accident insurance plan can be there for you in your time of need to help cover expenses such as:

· Ambulance rides

- Prescriptions
- Emergency room visits
- · Major Diagnostic Testing
- · Surgery and anesthesia
- Burns

Plan Features

- · Benefits are paid directly to you, unless otherwise assigned.
- · Coverage is guaranteed-issue (which means you may qualify for coverage without having to answer health questions).
- · Benefits are paid regardless of any other medical insurance.

What you need, when you need it.

Group accident insurance pays cash benefits that you can use any way you see fit.

AFLAC - STEPS PROGRAM FOR WASHINGTON SCHOOL DISTRICTS

Aflac Critical Illness

Aflac Critical Illness Plan provides cash benefits when an insured person is diagnosed with a covered critical illness and these benefits are paid *directly to you*. The plan provides a lump-sum benefit to help with out-of- pocket medical expenses <u>and</u> living expenses that can accompany a covered critical illness. Children are covered at 50% of benefit at no extra cost!

Plan Benefit Summary				
Heart Attack, Sudden Cardiac Arrest, Stroke	100%			
Major Organ Transplant, Kidney Failure, Bone Marrow Transplant	100%			
Cancer (Internal or Invasive)	100%			
Amyotrophic Lateral Sclerosis (ALS), Multiple Sclerosis (MS)	100%			
Health Screening (payable for employee and spouse only)	\$50 per calendar year			



Lump Sum Payout (per event) Non-Tobacco Rates					
Age	\$5,000	\$10,000	\$20,000	\$30,000	
18-29	\$2.32	\$3.62	\$6.23	\$8.84	
30-39	\$3.20	\$5.39	\$9.77	\$14.15	
40-49	\$5.36	\$9.72	\$18.43	\$27.13	
50-59	\$9.57	\$18.13	\$35.26	\$52.38	
60+	\$17.55	\$34.08	\$67.15	\$100.22	

The Aflac Group Critical Illness plan benefits include:

- · Critical Illness Benefit payable for:
 - Cancer
 - Heart Attack (Myocardial Infarction)
 - Stroke
 - Kidney Failure (End-Stage Renal Failure)
 - Major Organ Transplant
 - Bone Marrow Transplant (Stem Cell Transplant)
 - Sudden Cardiac Arrest
 - Coronary Artery Bypass Surgery
 - Non-Invasive Cancer
 - Skin Cancer
- · Health Screening Benefit

Features:

- · Benefits are paid directly to you, unless otherwise assigned.
- · Coverage is available for you, your spouse, and dependent children.
- Coverage may be continued (with certain stipulations). That means you can take it with you if you change jobs or retire.

How it works Aflac Group Critical Aflac Group A physician You You visit Illness pays an Initial Critical determines experience | the Illness that you Diagnosis Benefit of chest pains emergency coverage is have and numbness selected. room. suffered a in the left arm. 10,000 neart attack

Aflac Critical Illness Plan Detail Information

CANCER (Internal or Invasive)	100%
HEART ATTACK (Myocardial Infarction)	100%
STROKE (Ischemic or Hemorrhagic)	100%
MAJOR ORGAN TRANSPLANT	100%
KIDNEYFAILURE (End-Stage RenalFailure)	100%
BONEMARROWTRANSPLANT (StemCellTransplant)	100%
SUDDEN CARDIAC ARREST	100%
Amyotrophic Lateral Sclerosis (ALS or Lou Gehrig's Disease) & Sustained Multiple Sclerosis	100%
NON-INVASIVE CANCER	25%
CORONARY ARTERY BYPASS SURGERY	25%

INITIAL DIAGNOSIS

We will pay a lump sum benefit upon initial diagnosis of a covered critical illness when such diagnoses is caused by or solely attributed to an underlying disease. Cancer diagnoses are subject to the cancer diagnosis limitation. Benefits will be based on the face amount in effect on the critical illness date of diagnosis.

ADDITIONAL DIAGNOSIS

We will pay benefits for each different critical illness after the first when the two dates of diagnoses are separated by at least 6 consecutive months. Cancer diagnoses are subject to the cancer diagnosis limitation.

REOCCURRENCE

We will pay benefits for the same critical illness after the first when the two dates of diagnoses are separated by at least 6 consecutive months. Cancer diagnoses are subject to the cancer diagnosis limitation.

CHILD COVERAGEATNOADDITIONAL COST

Each dependent child is covered at 50 percent of the primary insured's benefit amount at no additional charge. Children-only coverage is not available.

SKIN CANCER BENEFIT

We will pay \$250 for the diagnosis of skin cancer. We will pay this benefit once per calendar year.

WAVER OF PREMIUM

If you become totally disabled due to a covered critical illness prior to age 65, after 90 continuous days of total disability, we will waive premiums for you and any of your covered dependents. As long as you remain totally disabled, premiums will be waived up to 24 months, subject to the terms of the plan.

SUCCESSOR INSURED BENEFIT

If spouse coverage is in force at the time of the primary insured's death, the surviving spouse may elect to continue coverage. Coverage would continue at the existing spouse face amount and would also include any dependent child coverage in force at the time.

HEALTH SCREENING BENEFIT (Employee and Spouseonly)

We will pay \$50 for health screening tests performed while an insured's coverage is in force. We will pay this benefit once per calendar year.

This benefit is only payable for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations. This benefit is payable for the covered employee and spouse.

This benefit is not paid for dependent children.

AFLAC - STEPS PROGRAM FOR WASHINGTON SCHOOL DISTRICTS

Aflac Hospital Plan

The Aflac Group Hospital Indemnity Plan provides cash benefits *directly to you* to help cover some of the costs associated with a covered hospital stay due to a sickness or accidental injury.

Plan Benefit Summary	
Hospital Admission (per confinement) Once per covered sickness or accident per calendar year	\$1,000
Hospital Confinement (per day)	\$150
Maximum confinement period: 31 days per covered sickness or covered accident	
Hospital Intensive Care (per day)	\$150
Maximum confinement period: 10 days per covered sickness or covered accident	
Intermediate Intensive Care Step-Down Unit (per day)	\$75
Maximum confinement period: 10 days per covered sickness or covered accident	
Health Screening Benefit (Payable once per calendar year per insured)	\$50

Monthly Premiums				
Employee	\$18.08			
Employee + Spouse	\$36.24			
Employee + Child(ren)	\$28.86			
Family	\$47.02			

The plan that can help with expenses and protect your savings

Does your major medical insurance cover all of your bills?

Even a minor trip to the hospital can present you with unexpected expenses and medical bills. And even with major medical insurance, your plan may only pay a portion of your entire stay.

That's how the Aflac Group Hospital Indemnity plan can help.

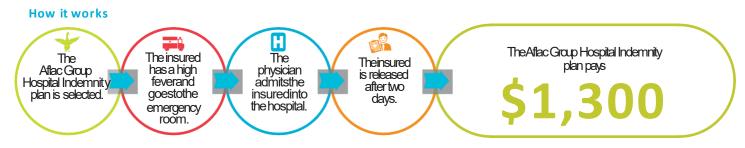
It provides financial assistance to enhance your current coverage. It may help avoid dipping into savings or having to borrow to address out-of-pocket-expenses major medical insurance was never intended to cover.

Like transportation and meals for family members, help with child care, or time away from work, for instance.

The Aflac Group Hospital Indemnity plan benefits include the following:

- · Hospital Confinement Benefit
- · Hospital Admission Benefit
- Hospital Intensive Care Benefit
- · Intermediate Intensive Care Step-Down Unit
- Successor Insured Benefit





Amountpayablewasgeneratedbasedonbenefitamountsfor: HospitalAdmission(\$1,000), and HospitalConfinement(\$150perday).

HOSPITAL ADMISSION BENEFIT per confinement (once per covered sickness or accident per calendar year for each insured) Payable when an insured is admitted to a hospital and confined as an inpatient because of a covered accidental injury or covered sickness. We will not pay benefits for confinement to an observation unit, or for emergency room treatment or outpatient treatment. We will not pay benefits for admission of a newborn child following his birth; however, we will pay for a newborn's admission to a Hospital Intensive Care Unit if, following birth, he is confined as an inpatient as a result of a covered accidental injury or covered sickness (including congenital defects, birth abnormalities, and/or premature birth).	\$1,000
HOSPITAL CONFINEMENT per day (maximum of 31 days per confinement for each covered sickness or accident for each insured) Payable for each day that an insured is confined to a hospital as an inpatient as the result of a covered accidental injury or covered sickness. If we pay benefits for confinement and the insured becomes confined again within six months because of the same or related condition, we will treat this confinement as the same period of confinement. This benefit is payable for only one hospital confinement at a time even if caused by more than one covered accidental injury, more than one covered sickness, or a covered accidental injury and a covered sickness.	\$150
HOSPITAL INTENSIVE CARE BENEFIT per day (maximum of 10 days per confinement for each covered sickness or accident for each insured) Payable for each day when an insured is confined in a Hospital Intensive Care Unit because of a covered accidental injury or covered sickness. We will pay benefits for only one confinement in a Hospital's Intensive Care Unit at a time. Once benefits are paid, if an insured becomes confined to a Hospital's Intensive Care Unit again within six months because of the same or related condition, we will treat this confinement as the same period of confinement. This benefit is payable in addition to the Hospital Confinement Benefit.	\$150
INTERMEDIATE INTENSIVE CARE STEP-DOWN UNIT per day (maximum of 10 days per confinement for each covered sickness or accident for each insured) Payable for each day when an insured is confined in an Intermediate Intensive Care Step-Down Unit because of a covered accidental injury or covered sickness. We will pay benefits for only one confinement in an Intermediate Intensive Care Step-Down Unit at a time. Once benefits are paid, if an insured becomes confined to a Hospital's Intermediate Intensive Care Step-Down Unit again within six months because of the same or related condition, we will treat this confinement as the same period of confinement. This benefit is payable in addition to the Hospital Confinement Benefit.	\$75

SUCCESSOR INSURED BENEFIT

If spouse coverage is in force at the time of the employee's death, the surviving spouse may elect to continue coverage. Coverage would continue according to the existing plan and would also include any dependent child coverage in force at the time.

HEALTH SCREENING BENEFIT / \$ 50 PER CALENDAR YEAR

The Health Screening Benefit is payable once per calendar year for health screening tests performed as the result of preventive care, including tests and diagnostic procedures ordered in connection with routine examinations.

This benefit is payable for each insured.

Residents of Massachusetts are not eligible for the Health Screening Benefit.

HealthAdvocate

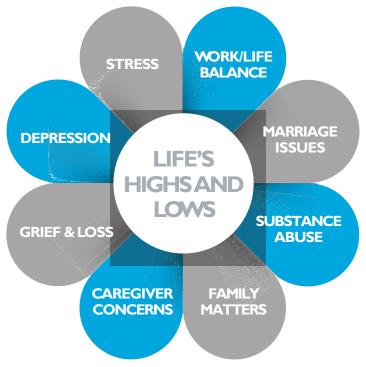
Telephonic EAP

Need help for life's highs and lows? Just call.

Introducing the Telephonic EAP Program, available through Aflac.

We never know what life can bring from one day the next. But you can be sure you have help when you need it. Health Advocate's Telephonic Employee Assistance Program provides support for a range of personal, family and work/life balance matters.

Telephonic EAP provides 24/7 phone access to licensed, professional counselors, prepared to help with your personal situation. They can also provide referrals for long-term counseling or specialized care, with customized plans to meet your specific needs.



USE ANY COMBINATION OF TOOLS, ANY TIME:



24/7 phone access to trained counselors



Long-term referrals and treatment plans



Support for full range of personal and work/life issues



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Whatever life brings, call on EAP for help:

Confidential telephone counseling sessions with highly trained, licensed professionals

24/7 phone access to professional counselors

Referrals for long-term counseling or specialized care

Customized treatment plans

Resource website for work/life matters

Help for depression and other mental health issues

Stress management

Support for dealing with grief and loss

Count on Telephonic EAP to be here when you need it.
When your coverage begins, call 855.423.8585 or visit healthadvocate.com/aflac.

Available through Aflac, powered by Health Advocate.

Substance abuse counseling

CAIC's affiliation with the Value-Added Service providers is limited only to a marketing alliance, and CAIC and the Value-Added Service providers are not under any sort of mutual ownership, joint venture, or are otherwise related. CAIC makes no representations or warranties regarding the Value-Added Service providers, and does not own or administer any of the products or services provided by the Value-Added Service providers. Each Value-Added Service provider offers its products and services subject to its own terms, limitations and exclusions. Value-Added Services are not available in Idaho or Minnesota. State availability may vary. Continental American Insurance Company, a proud member of the Aflac family of insurers, is a wholly-owned subsidiary of Aflac Incorporated.

This offering may not supersede the terms and conditions of any existing contract the client has with Health Advocate. Health Advocate reserves the right to refuse

any client group through Aflac if the client group cancels a pre-existing contract with Health Advocate prior to expiration date of the contract.

Medical Bill Saver has restrictions for negotiations on in-network deductibles and co-insurance in Arizona, Colorado, District of Columbia, Illinois, Indiana, New

Jersey, North Carolina, South Dakota and Utah.

aflacgroupinsurance.com |1.800.433.3036

Continental American Insurance Company | Columbia, South Carolina



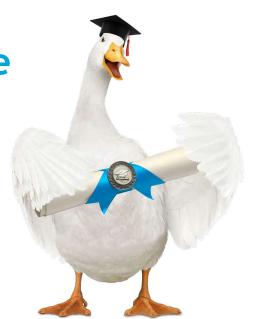
YOUR VIRTUAL COLLEGE COACH

College can be hard - planning for it shouldn't be

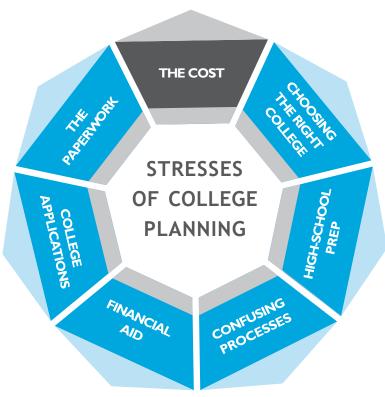
Introducing SimpliCollege brought to you by Aflac

You already know college is a smart decision. But helping your student plan and pay for college can be a difficult, stressful and confusing process for a family. SimpliCollege can help your student graduate on time with less stress and less debt.

From admissions and high school planning, to financial aid and applications, SimpliCollege offers all the information you need to navigate the entire process – and can even help lower your costs.



It pays to become a better-educated consumer



SIMPLICOLLEGE PROVIDES HELP FROM ONE SOURCE:



Financial planning and calculators.



Tips for college search and selection.



Navigating financial aid and tuition.



May help lower costs.



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SimpliCollege has all the tools you need



ROADMAPS TO SUCCESS – Find roadmaps from ninth grade through college that outline what students should be doing and when, including checklists.



COLLEGE SEARCH – Learn how to plan, research and put together a strategy that helps you target the right colleges for your student.



NET PRICE CALCULATORS – Calculate the net price for a single academic year after factoring in scholarships and grants.



SCHOLARSHIPS AND NEGOTIATION – Find resources to help your student locate and apply for money-saving scholarships as well as tips for negotiating lower college costs.



COLLEGE SELECTIVITY – Learn how to best select and get admitted to specific colleges.



20 KEY FINANCIAL MISTAKES – Get a detailed explanation of the kinds of costly mistakes to avoid so you can be better educated about paying for college.

When it comes to college, it pays to have a plan. <u>Learn more</u> about SimpliCollege.

To sign up, visit simplicollege.com/wasteps

Available through Aflac, powered by SimpliCollege.

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Continental American Insurance Company | Columbia, South Carolina

Don't let medical bills bring you down

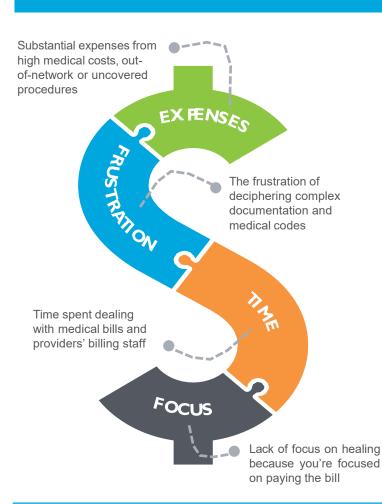
Medical Bill Saver,™ available through Aflac, can help you save on your medical costs.

High costs can add insult to injury. It can be overwhelming to receive an expensive bill for medical or dental treatment just when you're starting to feel better. That's why Aflac is pleased to provide you with a program that can help save you money — and time.

Through Medical Bill Saver, you have access to skilled negotiators who will work to reduce medical and dental bills over \$400 – it's simple and easy to use.



What can Medical Bill Saver save you?



HOWDOES ITWORK?

Medical Bill Saver is available for you, your spouse, dependent children, parents and parents-in-law.



Send in your medical or dental bills of \$400 or more.



Your negotiator will contact the provider and try to negotiate a discount or reduction.



Once an agreement is made, the provider approves payment terms and conditions.



You receive an easy-to-read personal Savings Result Statement that summarizes the outcome and payment terms.



How bill reviews help you

It never hurts to have a bill reviewed to ensure there are no errors and to see if you could receive a discount.

For example, Equifax found that, for hospital bills totaling \$10,000 or more, there was an average error of \$1,300.1

HERE'S AN EXAMPLE² OF THE SAVINGS HEALTH ADVOCATE CAN PROVIDE:

- An employee had heart surgery, which amounted to approximately \$100,000 in medical bills.
- The employee sent the bills to Health Advocate.
- The greatest invoice was for approximately \$92,000.
- Health Advocate was able to achieve a 30% discount, which amounted to approximately \$27,600, for the bill and set up a payment plan for the balance.

HealthAdvocate

Don't let medical bills bring you down.

Get an expert negotiator who can help you save with Medical Bill Saver.™

When your coverage begins, call 855.423.8585 or visit healthadvocate.com/aflac

Available through Aflac, powered by Health Advocate.

- 1. There's a Strong Chance You Are Paying for Expensive Medical Billing Mistakes, Huffpost, May 17, 2017.
- Health Advocate internal reporting of Aflac client data, 2017.

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